

BEFORE THE
DIVISION OF MEDICAL QUALITY
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

In the Matter of the Accusation
Against:

PAUL W. LAMBERT, M.D.
Certificate No. C-16439

No. 16-94-44643

Respondent

DECISION

The attached Stipulation for Surrender of License is hereby adopted by the Division of Medical Quality as its Decision in the above-entitled matter.

This Decision shall become effective on September 7, 1995

IT IS OR ORDERED August 8, 1995

By:


IRA LUBELL, M.D.

Chair

Division of Medical Quality

1 DANIEL E. LUNGREN, Attorney General
of the State of California
2 JANA L. TUTON
Supervising Deputy Attorney General
3 ROBERT C. MILLER
Deputy Attorney General
4 1300 I Street, Suite 125
P. O. Box 944255
5 Sacramento, CA 94244-2550
Telephone: (916) 324-5161

6
Attorneys for Complainant

8 BEFORE THE DIVISION OF MEDICAL QUALITY
MEDICAL BOARD OF CALIFORNIA
9 DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

10

11 In the Matter of the Accusation)	
Against:	)	No. 16-94-44643
12)	
13 PAUL W. LAMBERT, M.D.	)	STIPULATION FOR SURRENDER
619 Diagonal	)	OF LICENSE
14 Clarkston, WA 99403)	
)	
15 Physician's & Surgeon's)	
Certificate No. C16439)	
)	
16 Respondent.)	
)	
17)	

18 IT IS HEREBY STIPULATED AND AGREED by and between the
19 parties to the above-entitled matter, that the following matters
20 are true:

21 1. Complainant, Dixon Arnett, is the Executive
22 Director of the Medical Board of California, Department of
23 Consumer Affairs (hereinafter the "Board") and is represented by
24 Daniel E. Lungren, Attorney General of the State of California,
25 by Robert C. Miller, Deputy Attorney General.

26 2. Paul W. Lambert, M.D. (hereinafter "respondent"),
27 in pro per, has carefully read and fully understands the effect
28 of this stipulation.

1 3. Respondent has received and read the Accusation
2 which is presently on file and pending in case number 16-94-44643
3 before the Division of Medical Quality of the Medical Board of
4 California, Department of Consumer Affairs (hereinafter the
5 "Division"), a copy of which is attached as Exhibit "1" and
6 incorporated herein by reference.

7 4. Respondent understands the nature of the charges
8 alleged in the Accusation and that, if proven at hearing, such
9 charges and allegations would constitute cause for imposing
10 discipline upon respondent's license issued by the Board.

11 5. Respondent is aware of each of his rights,
12 including the right to a hearing on the charges and allegations;
13 the right to confront and cross-examine witnesses who would
14 testify against respondent; the right to testify and present
15 evidence on his own behalf, as well as to the issuance of
16 subpoenas to compel the attendance of witnesses and the
17 production of documents; the right to contest the charges and
18 allegations; and other rights which are accorded respondent
19 pursuant to the California Administrative Procedure Act (Gov.
20 Code, § 11500 et seq.); and other applicable laws, including the
21 right to seek reconsideration, review by the superior court, and
22 appellate review.

23 6. In order to avoid the expense and uncertainty of a
24 hearing, respondent freely and voluntarily waives each and every
25 one of these rights set forth above and admits the truth of the
26 allegations contained in Accusation number 19-94-44643.
27 Respondent agrees not to contest that cause exists to discipline
28 his physician's and surgeon's certificate pursuant to Business

1 and Professions Code section 2305, and hereby surrenders
2 Physician's and Surgeon's Certificate number C16439 for the
3 Division's formal acceptance.

4 7. Respondent understands that by signing this
5 stipulation he is enabling the Division of Medical Quality to
6 issue its order accepting the surrender of his license without
7 further process. In the event that this stipulation is rejected
8 for any reason by the Division, it will be of no force or effect
9 for either party.

10 8. Upon acceptance of the stipulation by the
11 Division, respondent understands that he will no longer be
12 permitted to practice as a physician and surgeon in California,
13 and also agrees to surrender and cause to be delivered to the
14 Division both his license and wallet certificate before the
15 effective date of the decision.

16 9. Respondent fully understands and agrees that if he
17 ever files an application for licensure or reinstatement in the
18 State of California, the Division shall treat it as a petition
19 for reinstatement, the respondent must comply with all the laws,
20 regulations and procedures for reinstatement, and all of the
21 charges and allegations contained in Accusation number
22 16-94-44643 will be deemed to be true, correct and admitted by
23 respondent when the Division determines whether to grant or deny
24 the petition.

25 10. In consideration of the foregoing stipulations,
26 admissions and recitals, the Board, upon formal acceptance of
27 this stipulation for surrender of license, agrees to withdraw,
28 / / /

1 without prejudice, Accusation number 16-94-44643 currently
2 pending against respondent.

3 11. This stipulation for surrender of respondent's
4 physician's and surgeon's certificate license is intended to be
5 the integrated writing memorializing and the complete agreement
6 of the parties herein.

7 12. Respondent may not withdraw this stipulation prior
8 to the Board's formal action on this stipulation.

9 ACCEPTANCE

10 I, Paul W. Lambert, M.D., have carefully read the above
11 stipulation and enter into it freely and voluntarily, and with
12 full knowledge of its force and effect, do hereby surrender my
13 Physician's and Surgeon's Certificate number C16439, to the
14 Division of Medical Quality, Medical Board of California for its
15 formal acceptance. By signing this stipulation to surrender my
16 license, I recognize that upon its formal acceptance by the
17 Division, I will lose all rights and privileges to practice as a
18 physician and surgeon in the State of California and I also will

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1 cause to be delivered to the Division both my license and wallet
2 certificate before the effective date of the decision.

3 DATED: 29 June, 1995


4 
5 PAUL W. LAMBERT, M.D.

6 Respondent

7 I concur in the stipulation.

8
9 DATED: 7/6, 1995

10 DANIEL E. LUNGREN, Attorney General
11 of the State of California
12 JANA L. TUTON
13 Supervising Deputy Attorney General

14 
15 ROBERT C. MILLER
16 Deputy Attorney General

17 Attorneys for Complainant
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1 DANIEL E. LUNGREN, Attorney General
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2 JANA L. TUTON
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Telephone: (916) 324-5161

6 Attorneys for Complainant
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10 BEFORE THE
DIVISION OF MEDICAL QUALITY
11 MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA

12 In the Matter of the Accusation
13 Against:

NO. 15-94-44643

14 PAUL W. LAMBERT, M.D.
619 Diagonal
15 Clarkston, Washington 99403
California Physician and
16 Surgeon Certificate
No. C16439

ACCUSATION

17 Respondent.
18

19 Dixon Arnett, for causes for discipline, alleges:
20

21 1. Complainant Dixon Arnett makes and files this
22 accusation in his official capacity as Executive Director of the
23 Medical Board of California (hereinafter referred to as the
24 "Board").
25

26 2. On November 19, 1954, the Medical Board of
27 California issued physician and surgeon certificate number C16439

1 to Paul W. Lambert, M.D. The certificate expired December 31,
2 1993.

3
4 3. Under Business and Professions Code section 2234,
5 the Division of Medical Quality shall take action against any
6 licensee who is charged with unprofessional conduct.

7 Under Business and Professions Code section 2305, the
8 revocation, suspension, or other discipline by another state of a
9 license or certificate to practice medicine issued by the state
10 shall constitute unprofessional conduct against such licensee in
11 this state.

12 Under Business and Professions Code section 118(b), the
13 expiration of a license shall not deprive the Board of
14 jurisdiction to proceed with a disciplinary action during the
15 time within which the license may be renewed, restored, or
16 reinstated.

17 Under Business and Professions Code section 2428, a
18 license which has expired may be renewed any time within five
19 years after expiration.

20 Under Business and Professions Code section 125.3, the
21 Medical Board of California may request the administrative law
22 judge to direct a licentiate found to have committed a violation
23 or violations of the licensing act to pay a sum not to exceed the
24 reasonable costs of the investigation and enforcement of the
25 case.

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1 4. Respondent has subjected his physician and surgeon
2 certificate to discipline under Business and Professions Code
3 section 2305 on the grounds of unprofessional conduct in that on
4 September 8, 1994, the State of Washington, Department of Health,
5 Medical Quality Assurance Commission suspended respondent's
6 license to practice medicine in that state for five years by way
7 of a Stipulated Findings of Fact, Conclusions of Law and Agreed
8 Order. The suspension was stayed and respondent was placed on
9 probation for five years with terms and conditions. Respondent
10 was charged with unprofessional conduct for prescribing excessive
11 amounts of Darvocet N-100, Diazepam and Vicodin, controlled
12 substances, to patients, and for failing to record on patient
13 records some prescriptions for the controlled substances.
14 Attached as Exhibit A and incorporated by reference is a true and
15 correct copy of the Stipulated Findings of Fact, Conclusions of
16 Law and Agreed Order from the State of Washington.

17
18 WHEREFORE, complainant prays a hearing be had and that
19 the Medical Board of California make its order:

20 1. Revoking or suspending physician and surgeon
21 certificate number C16439, issued to Paul W. Lambert, M.D.

22 2. Prohibiting Paul W. Lambert, M.D. from supervising
23 physician's assistants.

24 3. Ordering Paul W. Lambert, M.D., to pay to the
25 Medical Board of California its costs for investigation and
26 enforcement according to proof at the hearing, pursuant to
27 Business and Professions Code section 125.3.

1 4. Taking such other and further action as may be
2 deemed proper and appropriate.

3 DATED: March 8, 1995

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7 DIXON ARNETT
8 Executive Director
9 Medical Board of California
10 Department of Consumer Affairs
11 State of California

12 Complainant

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25 (SM 2/23/95)
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EXHIBIT A

ORIGINAL

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
MEDICAL QUALITY ASSURANCE COMMISSION

In the Matter of the License)	
to practice medicine of	)	No. 91-09-0018MD
	)	93-02-0073MD
PAUL W. LAMBERT, M.D.)	
	)	STIPULATED FINDINGS OF FACT
Respondent.	)	CONCLUSIONS OF LAW AND
	)	AGREED ORDER
)	

The Medical Quality Assurance Commission (Commission), by and through Michael L. Farrell, Department of Health Staff Attorney, and Jerald R. Anderson, Assistant Attorney General, and Paul W. Lambert, M.D., individually, stipulate and agree to the following:

I. PROCEDURAL STIPULATIONS

- 1.1 Paul W. Lambert, M.D., is licensed to practice medicine in the State of Washington at all times relevant to this action.
- 1.2 On April 11, 1994 the Commission issued a Statement of Charges regarding the professional practice of Respondent.
- 1.3 The Statement of Charges alleges Respondent violated RCW 18.130.180(4), which defines unprofessional conduct as "negligence...which results in injury to a patient or creates an unreasonable risk that a patient may be harmed"; RCW 18.130.180(6), which defines unprofessional conduct as the "prescription for use...of controlled substances or legend drugs in any way other than for legitimate or therapeutic purposes."

ORIGINAL

ORIGINAL

- 1.4 Respondent understands the State is prepared to proceed to a hearing on the allegations of the Statement of Charges.
- 1.5 Respondent understands he has the right to defend himself against the allegations in the Statement of Charges by presenting evidence in his behalf at the hearing.
- 1.6 Respondent understands that should the State in fact prove at the hearing the allegations of the Statement of Charges the Commission has the power and authority to impose sanctions under RCW 18.130.160.
- 1.7 Respondent and the Commission agree to expedite the resolution of this matter by means of a Stipulated Findings of Fact, Conclusions of Law, and Agreed Order.
- 1.8 Respondent waives the opportunity for a hearing on the Statement of Charges contingent upon the entry of the following Agreed Order.
- 1.9 Respondent acknowledges that the Agreed Order is not binding unless and until it is accepted by the Commission.
- 1.10 Respondent acknowledges that should this Stipulated Findings of Fact, Conclusions of Law, and Agreed Order be accepted it will be subject to the reporting requirements of RCW 18.130.110 and interstate/national reporting but not limited to, the National Practitioner Data Bank per 45 CFR 60.
- 1.11 WAIVER OF OBJECTION: Respondent is informed and understands that:
 - a. At the presentation of this Agreed Order the Commission may ask the parties for information regarding the facts of this case. The parties have the right to be present, ask and answer questions and make argument to the Commission regarding the appropriateness of this Agreed Order.
 - b. Respondent waives any objection to the participation on a hearing panel of all or some of the Commission members who hear a Stipulation presentation in the event that the Stipulation is rejected and this matter proceeds to a hearing.

II. STIPULATED FACTS

The State and Respondent stipulate to the following facts:

- 2.1 Respondent prescribed excessive amounts of Darvocet N-100 for Patient One between March 1991 and May 1991.
- 2.2 Respondent prescribed excessive amounts of Diazepam to Patient One between May 1991 and June 1991, creating an unreasonable risk of harm to Patient One.
- 2.3 Respondent failed to record some of the prescriptions for Darvocet N-100 and Diazepam in Patient One's chart.
- 2.4 Respondent prescribed excessive amounts of Vicodin to Patient Two between October 1992 and December 1992, creating an unreasonable risk of harm to Patient Two.
- 2.5 Respondent failed to record some prescriptions for Vicodin in Patient Two's chart.
- 2.6 Respondent prescribed excessive amounts of Darvocet N-100 to Patient Three between October 1991 and January 1993, creating an unreasonable risk of harm to Patient Three.
- 2.7 Respondent failed to record some of the prescriptions for Darvocet N-100 in Patient Three's chart.
- 2.8 Respondent prescribed excessive amounts of Vicodin to Patient Four between December 1991 and February 1993, creating an unreasonable risk of harm to Patient Four.
- 2.9 Respondent failed to record some prescriptions of Vicodin in Patient Four's chart.
- 2.10 Respondent prescribed excessive amounts of Vicodin ES to Patient Five between October 1992 and February 1993, creating an unreasonable risk of harm to Patient Five.

- 2.11 Respondent failed to record some prescriptions for Vicodin ES in Patient Five's chart.
- 2.12 Respondent prescribed excessive amounts of Halcion to Patient Six, whom Respondent knew had a history of drug abuse, between April 1992 and February 1993, creating an unreasonable risk of harm to Patient Six.
- 2.13 Respondent also prescribed Halcion to Patient Six between September 1991 and February 1993, an excessive period of time, creating an unreasonable risk of harm to Patient Six.
- 2.14 Respondent failed to record some of the prescriptions for Halcion in Patient Six's chart.

III. CONCLUSIONS OF LAW

The State and Respondent do not object to entry of the following Conclusions of Law:

- 3.1 The Commission has jurisdiction over Respondent and over the subject matter of this proceeding.
- 3.2 The above facts, if proved at hearing, constitute a commission of unprofessional conduct as defined by RCW 18.130.180(4) and (6).
- 3.3 The above facts, if proved at hearing, constitute grounds for discipline under RCW 18.130.160.

IV. AGREED ORDER

Based on the preceding Stipulated Facts and Conclusions of Law, the Commission hereby orders that Respondent's license shall be suspended for a period of five years. The suspension shall be stayed and probation granted on the condition Respondent complies with the following terms and conditions:

- 4.1 Respondent shall utilize a SOAP charting format for all patient files.

4.2 CONTROLLED SUBSTANCES

- A. Respondent shall write all prescriptions for controlled substances for out-patient usage on serially numbered triplicate prescription pads obtained from the Medical Disciplinary Commission staff. Respondent shall submit the third copies of all such prescriptions to the Medical Quality Assurance Commission quarterly with the time period beginning with the date of the Agreed Order. Respondent shall record prescriptions for controlled substances for hospitalized and residential patients in the in-patient record.
- B. Respondent shall not prescribe scheduled drugs for more than two (2) weeks for any single diagnosis or complaint.
- C. Respondent shall not provide, prescribe or inject any scheduled drugs to any patient with an addiction history or suspected addiction problem.
- D. Respondent shall note the following information in a patient's chart before providing or prescribing any Schedule II, III, IV, or V controlled substance:
 - (1) The diagnosis for which the medication is being provided;
 - (2) The indications of the use of the medication; and
 - (3) The amount of medication prescribed or provided.
- E. Respondent shall prescribe medications only pursuant to appropriate indications, in appropriate amounts and for appropriate periods of time.

4.3 CONTINUING MEDICAL EDUCATION (CME):

- A. Respondent shall complete 25 hours of Category I CME in the areas of prescribing controlled substances, addiction or substance abuse. These CME hours shall be in addition to the CME hours required for licensure.
- B. The CME course hours must be approved by the Commission or the Commission's designee in advance.
- C. Thirteen (13) of the CME course hours required in paragraph 4.3A. shall be completed within one year of the effective date of this Order. The remaining twelve (12) of the CME course hours shall be completed within 24 months of the effective date of this Order. Proof of completion of the first thirteen (13) CME course hours shall be submitted within thirteen (13) months of the effective date of this Order. Proof of completion of the second twelve (12) CME course hours shall be submitted within twenty-five (25) months of the effective date of this Order. Proof shall be submitted to the following address:

Compliance Officer
Medical Disciplinary Commission
1300 S.E. Quince Street, M/S: EY-25
P.O. Box 47866
Olympia, Washington 98504-7866

4.4 Respondent shall ensure that all care delivered to patients falls within acceptable standards of medical practice.

4.5 COMPLIANCE:

- A. Respondent shall appear before the Commission six months from the date this Agreed Order is signed by the Commission, or as soon thereafter as the Commission's schedule permits, and present proof that he is complying with the Order. He shall continue to make such compliance appearances annually or as soon thereafter as the Commission's schedule permits, until the probation is lifted by the Commission.
- B. In order to monitor compliance with the Order Respondent agrees that a representative of the Commission may make announced visits semi-annual to Respondent's practice to:
 - (1) Inspect office and or medical records;
 - (2) Interview office staff or Respondent's supervisors;
 - (3) Review other aspects of Respondent's practice.
- C. All costs of compliance shall be borne by the Respondent.
- D. If Respondent violates the terms/conditions of the Commission's Order in any respect the Commission may:
 - (1) Summarily suspend Respondent's license to practice under RCW 18.130.050(7);
 - (2) Impose conditions as appropriate under RCW 18.130.160 to protect the public, following notice to the Respondent and the opportunity to be heard; and/or
 - (3) Issue charges of unprofessional conduct under RCW 18.130.180.

4.6 Respondent may petition the Commission for a change in the terms/conditions of the Order no sooner than two years from the date it is signed by the Commission.

4.7 RESIDENCE:

- A. Respondent shall inform the Commission, in writing, of changes in his practice and residence address.
- B. In the event Respondent leaves the states of Washington or Idaho to reside or to practice outside the states of Washington or Idaho, Respondent must notify the Commission in writing of the dates of departure and return.
- C. The period of probation/suspension shall be tolled for any time period during which Respondent resides and/or practices outside the states of Washington or Idaho.


4.8 Pursuant to RCW 18.130.160(8) Respondent shall pay a \$500 fine within ninety (90) days of the effective date of this Order. The fine shall be payable to the State Treasurer and sent to the following address:

Executive Secretary
Medical Disciplinary Commission
1300 SE Quince Street, M/S EY 25
Post Office Box 47866
Olympia, Washington 98504-7866

- 4.9 Respondent shall obey all federal, state and local laws, and all rules governing the practice of medicine in Washington.
- 4.10 The Commission's jurisdiction over Respondent shall continue until Respondent files a written petition for termination of the Commission's jurisdiction and, if the Commission so requests, appears personally before the Commission. Termination of the Commission's jurisdiction shall be by written order of the Commission.

- 4.11 This Agreed Order will be subject to the reporting requirements of RCW 18.130.110 and the National Practitioner Data Bank, 45 CFR 60.
- 4.12 This Agreed Order is not binding on Respondent or the Commission unless accepted by the Commission.
- 4.13 This Agreed Order shall become effective ten (10) days from the date the Order is signed by the Commission chair, or upon service of the Order on the Respondent, whichever date is sooner.

I, Paul W. Lambert, M.D., hereby certify that I have read this Stipulation Agreement in its entirety, that I understand I have the right to counsel in negotiating this Agreed Order and have waived that right, that I fully understand and agree to all of it, and in witness whereof I affix my signature this 1st day of Sept 1994, 1994.


Paul W. Lambert, M.D.
Respondent

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V. ORDER

The Commission accepts the Stipulated Findings of Fact, Conclusions of Law, and Agreed Order ordered. Respondent is ORDERED to comply with the conditions stated in paragraph IV above. IT IS FURTHER ORDERED that all parties shall be bound by the terms and conditions of section IV.

DATED this 8th day of September, 1994.

MEDICAL QUALITY ASSURANCE COMMISSION

By: Larry T. Brice, M.D.
Larry T. Brice, M.D.
CHAIR

Presented by:

Michael L. Farrell
Michael L. Farrell WSBA # 16022
Department of Health Staff Attorney

Jerald Anderson WSBA # 8734
Assistant Attorney General

STIPULATED TO AND APPROVED FOR ENTRY:

Paul W. Lambert
Paul W. Lambert, M.D.
Respondent

Attorney for Respondent

STATE OF WASHINGTON
DEPARTMENT OF HEALTH
MEDICAL DISCIPLINARY BOARD

In the Matter of the License)	
to practice of medicine of	)	No. 91-09-0018MD
	)	93-02-0073MD
PAUL W. LAMBERT, M.D.)	
	)	STATEMENT OF CHARGES
Respondent.)	
)	

The Hearings Manager of the State of Washington Department of Health upon designation by the disciplinary authority states and alleges as follows:

Section 1: LICENSE STATUS

1.1 At all times material to this Statement of Charges Respondent has been licensed to practice medicine by the State of Washington.

Section 2: CONFIDENTIAL SCHEDULE

2.1 The patients referred to in this Statement of Charges are identified in the attached Confidential Schedule.

Section 3: FACTUAL ALLEGATIONS

3.1 Darvocet N-100 is a schedule IV controlled substance and is known to be habit-forming. According to the Physician's Desk Reference (PDR), the maximum recommended dose is 600 mg/day.

3.2 Respondent prescribed Darvocet N-100 for Patient One in amounts greater than 600mg/day on March 18, 1991, and May 24, 1991 creating an unreasonable risk of harm to Patient One.

3.3 Respondent failed to record in Patient One's chart prescriptions for Darvocet N-100 on January 8, 1991; March 11, 1991; March 18, 1991; May 6, 1991; May 24, 1991; and May 31, 1991.

3.4 Diazepam is a schedule IV controlled substance and is known to be habit-forming. According to the PDR, the recommended dosage is 2-10mg, 2-4 times per day. There is no maximum daily dose listed.

3.5 Respondent prescribed 290 10mg tablets of diazepam to Patient One between May 11, 1991 and June 10, 1991, inclusive, an average of 93mg per day. This exceeds the upper limit of 40mg per day as stated in the PDR, creating an unreasonable risk of harm to Patient One.

3.6 Respondent failed to record in Patient One's chart prescriptions for diazepam on May 14, 1991; May 15, 1991; June 6, 1991; and June 10, 1991.

3.7 Vicodin is a schedule III controlled substance and is known to be habit-forming. According to the PDR, the maximum daily dose is 8 tablets.

3.8 Respondent prescribed Vicodin to Patient Two in amounts greater than 8 tablets per day on October 8, 1992; October 19, 1992; October 30, 1992; and December 19, 1992, creating an unreasonable risk of harm to Patient Two.

3.9 Respondent failed to record in Patient Two's chart prescriptions for Vicodin on October 8, 1992; October 19, 1992; October 30, 1992; and December 19, 1992.

3.10 Darvocet N-100 is a schedule IV controlled substance and is known to be habit-forming. According to the PDR, the maximum recommended dose is 600 mg/day. The PDR also expressly warns against prescribing Darvocet N-100 for patients who are addiction prone.

3.11 Respondent prescribed Darvocet N-100 for Patient Three, a recovering alcoholic, in amounts greater than 600mg/day on October 26, 1991; October 30, 1991; November 9, 1991; February 26, 1992; March 18, 1992; March 26, 1992; April 1, 1992; April 20, 1992; April 27, 1992; September 25, 1992; September 30, 1992; October 12, 1992; October 20, 1992; December 19, 1992; and January 9, 1993, creating an unreasonable risk of harm to Patient Three.

3.12 Respondent failed to record prescriptions for Darvocet N-100 in Patient Three's chart on November 9, 1991; November 26, 1991; January 15, 1992; January 27, 1992; February 26, 1992; March 16, 1992; March 18, 1992; March 26, 1992; April 1, 1992; April 27, 1992; September 14, 1992; September 25, 1992; October 12, 1992; November 11, 1992; November 12, 1992; December 19, 1992; and January 9, 1993.

3.13 Vicodin is a schedule III controlled substance and is known to be habit-forming. According to the PDR, the maximum daily dose is 8 tablets.

3.14 Respondent prescribed Vicodin to Patient Four in amounts greater than 8 tablets per day on December 3, 1991; May 15, 1992; September 15, 1992; November 4, 1992; November 30, 1992; December 11, 1992; December 19, 1992; January 19, 1993; January 26, 1993; February 1, 1993; February 13, 1993; and February 22, 1993, creating an unreasonable risk of harm to Patient Four.

3.15 Respondent failed to record prescriptions for Vicodin in Patient Four's chart on August 21, 1991; October 10, 1991; December 24, 1991; July 17, 1992; September 8, 1992; September 15, 1992; October 7, 1992; November 24, 1992; December 19, 1992; January 8, 1992; January 19, 1992; February 1, 1993; February 13, 1992; and February 22, 1993.

3.16 Vicodin ES is a schedule III controlled substance and is known to

be habit-forming. According to the PDR, the maximum daily dose is 5 tablets.

3.17 Respondent prescribed Vicodin ES to Patient Five in amounts greater than 5 tablets per day on October 23, 1992; November 5, 1992; December 17, 1992; January 5, 1993; January 18, 1993; January 29, 1993; February 12, 1993; and February 23, 1993, creating an unreasonable risk of harm to Patient Five.

3.18 Respondent failed to record prescriptions for Vicodin ES in Patient Five's chart on October 23, 1992; November 5, 1992; November 30, 1992; December 17, 1992; January 18, 1992; January 29, 1992; and February 12, 1993.

3.19 Halcion is schedule IV controlled substance and is known to be habit-forming. The PDR states the risk of dependence is increased in patients with a history of drug abuse. The PDR also states the maximum recommended dose is .5mg/day, prescriptions for Halcion should be written for short-term use, and use for more than 2-3 weeks requires complete reevaluation of the patient.

3.20 Respondent prescribed Halcion to Patient Six, whom Respondent knew had a history of drug abuse, in amounts greater than .5mg/day on April 1, 1992; May 14, 1992; May 26, 1992; June 15, 1992; July 8, 1992; July 24, 1992; August 21, 1992; September 3, 1992; October 2, 1992; November 4, 1992; December 1, 1992; December 24, 1992; December 30, 1992; January 26, 1992; February 2, 1992; and February 5, 1992, creating an unreasonable risk that Patient Six may be harmed.

3.21 Respondent also prescribed Halcion between September 1991 and February 1993, an excessive period of time, creating an unreasonable risk of harm to Patient Six.

3.22 Respondent failed to record prescriptions for Halcion in Patient Six's chart on March 9, 1992; May 14, 1992; September 3, 1992; October 2, 1992; December 24, 1992; and February 5, 1993.

Section 4: ALLEGED VIOLATIONS

4.1 The facts alleged in paragraphs 3.1 through 3.22, individually and collectively, if proved, constitute a violation of RCW 18.130.180(4) which defines as unprofessional conduct:

- (4) Incompetence, negligence, or malpractice which results in injury to a patient or which creates an unreasonable risk that a patient may be harmed;

....

4.2 The facts alleged in paragraphs 3.1, 3.2, 3.4, 3.5, 3.7, 3.8, 3.10, 3.11, 3.13, 3.14, 3.16, 3.17, 3.19, 3.20, and/or 3.21, if proved, constitute a violation of RCW 18.130.180(6) which defines as unprofessional conduct:

- (6) The possession, use, prescription for use, or distribution of controlled substances or legend drugs in any way other than for legitimate or therapeutic purposes....

It is further alleged that the allegations specified and conduct referred to in this Statement of Charges affect the public health, safety and welfare, and the Medical Disciplinary Board directs that a notice be issued and served on the Respondent as provided by law, giving the Respondent opportunity to defend against the accusations of the

Statement of Charges. If the Respondent fails to defend against these allegations, the Respondent shall be subject to such discipline as is appropriate under RCW 18.130.160.

DATED this 11th day of April, 1994.

Washington State

Medical Disciplinary Board

By: Kristin Hamilton

Kristin Hamilton
Hearings Manager

Gerald R. Anderson
Gerald R. Anderson WSBA #8734
Assistant Attorney General
Licensing Division
P.O. Box 40110
Olympia, Washington 98504-0110
(206) 753-6987